



Have you applied elsewhere for a dog? Yes _____ No _____ If yes, where: _____
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DOG ADOPTION APPLICATION

Date: _____

Pet Name or type looking for: _____

PERSONAL INFORMATION

If you intentionally falsify any information on the application, the adoption process will be terminated.

Name _____

Spouse/Significant Other/ Roommate _____

Address _____ City/State/Zip _____

Length of time at this address _____

Home Phone _____ Cell Phone _____ Work _____

Email Address _____

Is the dog for you or someone else? _____

LIVING SITUATION (CIRCLE OR 'X')

Own Home	Own Condo	Renting Apartment	Renting Room	Rent Duplex	Live with Roommate(s)
Rent Home	Rent Room	Live with Parents	Live in Trailer Park	Live with Friends	Live with In-laws

Landlord's Name & Phone # _____

Does Landlord allow dogs? _____ Are there any requirements? _____

Current or Past Veterinarian and Phone # 1. _____

Current or Past Veterinarian and Phone # 2. _____

Did you call your Veterinarian and have them release your records to Noah Project? _____

Personal References and Phone # 1. _____

Personal References and Phone # 2. _____

Personal References and Phone # 3. _____

Are you planning to sell your home or moving in the near future? _____

If you have to move, what do you plan to do with you pet(s)? _____

Are you 21 years of age or older? Yes _____ No _____ Are you a student? Yes _____ No _____

Are you employed? Yes _____ How many hours will your pet be alone? _____

No _____ If not, how will you support this pet? _____

Who in the household will be the dog's primary care giver? _____

Have you or anyone in the household been convicted of animal abuse? _____

If yes, what are the circumstances? _____

Do all members of your home know you plan to adopt a pet? No _____ Yes _____

How many adults live in your home? _____ How many children? _____ Ages _____

The noise/ activity level in my home is usually: High _____ Medium _____ Low _____

Is anyone in your household allergic to dogs? _____

If someone becomes allergic to, how will you deal with this? _____

DOG SELECTION

How much time are you prepared to allow your new pet to adjust to your house?

Are you prepared to spend several weeks or perhaps months waiting for your new pet to adjust to their new environment and for you to adjust with them? _____

What is your main reason for wanting a dog at this time? _____

What will be your dog's job be in the new home? (CIRCLE OR 'X' ALL THAT APPLY)

Guard/ Security	Companion	Hunter	Couch Warmer
Companion for another pet	Child's Pet	Walking Buddy	Other

Do you have a specific breed or sex preference for your new pet? _____

Preferred age: _____

Size at Maturity: _____ Hair Coat: _____

What is your preferred level of exercise with a dog? Please circle or mark all that apply.

Couch Potato	Short Walks	Hiking / Jogging	Long Runs
Dog Parks	Yard Exercise	Other	

Other personality / characteristics you are looking for: _____

Do you need a dog that will be adaptable to any of these considerations? (CIRCLE OR 'X' ALL THAT APPLY)

Other Dogs	Cats	Children	Busy Household	Quiet Household
Adults	Farm Animals	Small Caged Animals	Other	

DOG CARE

What will you feed your new pet & how often? _____

How long will your pet be left alone? _____

What shift do you and other adults work? _____

Where will your dog be kept during the day? (CIRCLE OR 'X' ALL THAT APPLY)

Kennel / Crate	Bring to Work	In Garage
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In House	Tied Out	Barn
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Do you normally walk your dog on or off their leash? _____

Is your property currently fenced? If so, what kind and height? _____

Where will your dog be kept when no one is home? _____

Where will your dog be kept during the night? _____

How will your dog be exercised? _____

What would you do if your dog develops a problem with:

Urinating / defecating in the house: _____

Digging: _____

Excessive Barking: _____

Biting / Play Biting: _____

Destructive Chewing: _____

Shedding Excessive Hair: _____

Keeping you awake at night: _____

Ruining your favorite Clothes: _____

Growling at Guests: _____

Separation Anxiety: _____

Aggression: _____

Bad dog habits that I just cannot tolerate are: _____

What would you do if the undesirable behavior continued? _____

Would you willingly attend obedience classes at your own expense? Yes _____ No _____

How will you keep your dog confined to your property? (CIRCLE OR 'X' ALL THAT APPLY)

Fenced yard	Chained / Tied Out	Trolley System	Leash
Trained to Stay	Invisible Fence / Radio collar	Kept under Supervision	Other

What is the longest period of time you would leave your pet unattended **OUTSIDE**? _____

Are there times when the dog will be tied up? Yes _____ No _____

If yes, when? _____

Do you understand that leaving a dog **unattended** leaves it vulnerable to abuse and theft?

PET HISTORY

What pets do you NOW have in your home? Please include small-caged pets:

Type of Pet	Name	Breed	Age	Gender	Sprayed/ Neutered	Live where	Years Owned

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List pets owned in the past 10 years, other than those listed above – Listing most recent first:

Type of Pet	Name	Breed	Age	Gender	Sprayed/Neutered	Live where	Years Owned

Have you ever re-homed an animal to a shelter or a new household? Yes _____ No _____

Please Specify type of animal, breed, spayed/neutered, and how long you owned this animal

When and what were the circumstances? _____

Are you able to afford a vet bill of \$500 (or more) for emergency veterinary care? Yes _____ No _____

How much are you willing to spend on medical bills and maintenance for your new pet per year?

(CIRCLE OR 'X' ALL THAT APPLY)

Up to \$50	Up to \$500	Up to \$5,000
Up to \$100	Up to \$1,000	Whatever it takes

Have you ever adopted from Noah Project Before? Yes _____ No _____

Have you ever adopted from the Humane Society or any other rescue before? Yes _____ No _____

Are you aware that the potential commitment for your new pet could exceed 15 years? Yes _____ No _____

Are you willing to contact Noah Project if you are unhappy with your adoption? Yes _____ No _____

May a Noah Project Representative make a follow-up visit? Yes _____ No _____

Permission, Releases, Understanding and Certifications

I hereby permit Noah Project, or it appointed representative to call my reference(s), my neighbors, and anyone it may deem necessary to determine how I care for or have cared for my companion animals.

I hereby release to Noah Project or its appointed representative all veterinary records of the animals I own or have owned.

I understand that, with care, dogs can live 15 years or more and I am prepared to commit myself to the long-term care and safety of an animal I adopt from Noah Project, and to have the animal neutered, if not already done at the time of the adoption.

I understand that the animal I am applying to adopt may require medical treatment that could result in significant veterinary bills. I will not hold Noah Project accountable for the cost of veterinary treatment this animal may require after adoption.

I understand, if a situation develops where it is necessary to give this animal up, I will promptly notify Noah Project and return the animal to Noah Project.

I certify that all the information in this application is true and correct to the best of my knowledge and belief and I understand that any false information I supply may void the application.

Signature _____ Your Age _____ Date _____

Applicant – Please present Driver’s License with application